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FEC FORM 1			TEME GANIZ		_			Offi	ce Use On	lv		
NAME OF     COMMITTEE (ir	n full)	,	ck if name anged)		ole:If typing ne lines.	g, type	12FE			.9		
Graves for	Cong	ress										
ADDRESS (number a	nd street)	PO Box 335										
(Check if address is changed)		Calhoun					GA	3070	03-			
				CITY			STATE		ZIP	CODE		
COMMITTEE'S E-MA (Check if is change	address		vide only one		ess)							
COMMITTEE'S WEB  (Check if is change	address	RESS (URL) www.gravesf	orcongress.o	rg								
2. DATE 10	) / 11	20	11									
3. FEC IDENTIFIC	CATION NU	MBER	C	C00462556								
4. IS THIS STATE	MENT X	NEW (N)	OR		AMEND	DED (A)						
I certify that I have o	examined thi	s Statement a	nd to the be	st of my kno	owledge ai	nd belief it	is true, c	orrect and	complete	).		
Type or Print Name	of Treasurer	Paul Kilgore										
Signature of Treasure	Paul Kil	gore		[1	Electronical	ly Filed]	Date	10	11	/ Y	2011	Y
NOTE: Submission of		ous, or incompl			•			·	enalties o	of 2 U.S	.C. §437	g.
Office				F	or further in	formation c	ontact:		EEC E		1	_

C	Office		For further information contact:	FEC FORM 1
	Use Only		Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)